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SERIAL NUMBER 10/775,873	FILING DATE 02/10/2004 RULE	CLASS 271	GROUP ART UNIT 3653	ATTORNEY DOCKET NO. 07703-356002
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APPLICANTS

Alfred F. Bergeron, Chester Springs, PA;

Robert Clauser, Columbus, NJ;

Christopher L. Crawford, Pottstown, PA; David C. Deaville, West Chester, PA;

Michael D. Nunn, West Chester, PA;

Jeffrey T. Thawley, Claymont, DE;

Kenneth B. Wood, Downingtown, PA;

Stephen R. Watrous, Moravia, NY;

** CONTINUING DATA *****

This application is a DIV of 09/982,578 10/16/2001 PAT 6,712,352
 which claims benefit of 60/241,197 10/17/2000

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 05/06/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY PA	SHEETS DRAWING 22	TOTAL CLAIMS 6	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>				

ADDRESS

26211

FISH & RICHARDSON P.C.

CITIGROUP CENTER 52ND FLOOR

153 EAST 53RD STREET

NEW YORK, NY

10022-4611

TITLE

Lockable removable cassette

<p>FILING FEE RECEIVED 770</p>	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p>	<table border="1"><tr><td><input type="checkbox"/> All Fees</td></tr><tr><td><input type="checkbox"/> 1.16 Fees (Filing)</td></tr><tr><td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td></tr><tr><td><input type="checkbox"/> 1.18 Fees (Issue)</td></tr><tr><td><input type="checkbox"/> Other _____</td></tr><tr><td><input type="checkbox"/> Credit</td></tr></table>	<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
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